

**November 1, 2007**

# **Montana Healthcare Programs Notice**

## **All Provider Types**

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### **Enhanced Claims Editing — Bloodhound ClaimsGuard®**

Beginning December 1, 2007, healthcare programs administered by the Department of Public Health and Human Services will implement enhanced claims editing to identify situations where correct procedure coding principles need to be improved. These edits are based on nationally recognized sources such as the Centers for Medicare and Medicaid (CMS) Correct Coding Initiative (CCI) and the American Medical Association (AMA) Current Procedure Terminology (CPT®) guidance. A subset of these edits currently exists in the Medicaid Management Information System (MMIS). Integrating ClaimsGuard® into the MMIS will apply national standards more consistently across a wide variety of Montana's Healthcare Programs.

This change may affect any providers who bill for services using CPT®/HCPCS procedure codes. However, specific edits may not apply to certain provider types. Please review the individual provider notices to determine if this change will impact you. These edit modules will be phased in over time and may include enhanced editing related to the use of:

- Add-on codes
- Implementation of the Correct Coding Initiative edits (CCI) developed by CMS
- Appropriate use of Evaluation and Management codes for new and established patients, and multiple visits on the same day,
- Appropriate billing for Assistant at Surgery, Co-Surgery, and Team Surgery
- Appropriate billing within a Global Surgical Period
- Appropriate billing of incidental services
- Appropriate billing for service by age and gender
- Medical necessity based on National Coverage Determinations as documented by CMS
- Identification of duplicate services in certain instances, and
- Appropriate bundling of component procedures

As each edit module is implemented, provider notices will be published to provide guidance on how to improve procedure coding in accordance with published AMA and/or CMS standards. Each new exception will be mapped to a reason code for communication to the provider.

The first module relating to add-on codes is expected to be activated on December 1, 2007. Other edit modules will be implemented shortly thereafter.

## **Contact Information**

For claims questions or additional information, contact Provider Relations:

**Provider Relations toll-free in- and out-of-state: 1-800-624-3958**

**Helena: (406) 442-1837**

Visit the Provider Information website:

**<http://www.mtmedicaid.org>**

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